



## Cargo Loss & Damage Claim Form

Claimant Name	Claimant Claim reference	Date Prepared
Address		
Contact Name	Tel	Fax
		Email

### Claim is made with Cardinal Maritime on the Following described shipment

Bill of Lading Number	Cardinal Maritime reference	Date of Shipment
Number of pieces	Gross weight of consignment	Date of Delivery
Terms of sale (incoterms)	Vessel	Total value of shipment

### Details of claim to show how amount is determined

# Items	Description/Part #	Weight	Amount	Curr
Use separate page if additional room is needed		Total		

### Overview of claim

Please use this area to provide us with an overview of the claim

In support of the claim, please also provide the following documentation:

- Freight invoice
- Commercial invoice
- Packing list

- Delivery Note
- Photographs (If available)

Note:  
 In order to expedite the handling of your claim, please include the above documents as your claim will not be processed until properly supported. Please retain all damaged goods until the claim is concluded. It is your responsibility to ensure that your claim is received by your account manager or team member handling your file.